







**TESTIMONY AGAINST PROPOSED BUDGET CUTS TO DPH  
FOR SYRINGE EXCHANGE PROGRAM AND AIDS PREVENTION  
SERVICES FUNDING**

Martha G. Dale  
Executive Director, Leeway

February 18, 2010

I am the Executive Director of **Leeway**, Connecticut's multi-service provider to persons with HIV/AIDS. We are Connecticut's first and only sub-acute facility dedicated solely to the **care of people with HIV/AIDS** and now developer and provider of supportive housing for this population. I would like to present testimony in support of continued funding for two very important line items in the Department of Public Health's budget.

**The Governor's budget proposes to cut Syringe Exchange and AIDS prevention services by 30%.** The cuts to AIDS Services places us at the 1997 funding level; and the cuts to SEP fall below funding levels prior to 1995. During that same time period, **the number of people living with HIV/AIDS in the state has doubled.** We have publicly stated that we were willing to share the burden of the state's budget crisis, but not to have to do so disproportionately. A 30% cut is far too deep for us to be able to sustain the tremendous HIV prevention work offered across the state.

An analysis of those cuts is below.

**Department of Public Health**

	<b>Appropriated SFY 2009-10</b>	<b>Proposed SFY 2010-11</b>	<b>+/-</b>
<b>%</b>			
<b>AIDS Services</b>	\$4,952,598	\$3,466,819	(\$1,485,779)
30%			
<b>Syringe Exchange</b>	\$455,072	\$318,550	(\$136,522)
30%			

Injection Drug Users (IDUs) represent a significant percentage of people newly infected with HIV and of all persons living with HIV in the U.S. SEPs are one component of a comprehensive HIV prevention effort for IDUs that includes education on risk reduction, HIV testing, referral to drug addiction treatment, and referral to other medical and social services that in turn increase the effectiveness of SEPs.<sup>2</sup> SEPs provide a safe and accessible method for IDUs to exchange used syringes for sterile ones, lowering the risk of HIV transmission.<sup>7</sup> There are currently approximately 211 exchange programs operating one or more exchange sites in 34 states, the District of Columbia, the Commonwealth of Puerto Rico, and the Indian Nations.<sup>8</sup>

- CT has 10,574 persons living with HIV/AIDS as of 12.31.09, and the highest percentage of these is persons in the risk category of IDU – 38% of the total infected population.
  - Risk trends in CT indicate that about 50% of cases have a history of IDU, while about 25% are associated with MSM and about 25% with heterosexual transmission.
  - CT's number of newly infected persons due to IDU was at a high in 2005 with 525 persons, or nearly 40% of the total new infections. In 2009, that number dropped to 67, or 12% of the total new infections.
  - In New Haven, we have seen that number drop from 49% of all new cases attributable to IDU in 2003 to 10% in 2009.(CT.gov/dph/cwp)
- 
- Injection drug users (IDUs) accounted for up to 16 percent of all new HIV infections and 24 percent of the 1.1 million adults living with HIV in the U.S. in 2006.<sup>1</sup>
  - When implemented as part of a comprehensive HIV/AIDS prevention strategy, syringe exchange programs (SEPs) are an effective public health approach to reducing the spread of HIV/AIDS and other blood-borne diseases in communities across the U.S.<sup>2</sup>
  - In many states, syringe exchange programs actively encourage participants to return as many used syringes as possible.<sup>3</sup> As a result, the majority of syringes distributed by SEPs are returned.<sup>8</sup> A Baltimore study demonstrated that SEPs helped to reduce the number of improperly discarded syringes by almost 50 percent.<sup>4</sup>
  - Studies demonstrate that the availability of SEPs in communities results in the safe disposal of used syringes. For instance, in Portland, the number of improperly discarded syringes decreased by almost two-thirds after the implementation of an SEP.
  - SEPs do not encourage the initiation of drug use nor do they increase the frequency of drug use among current users.<sup>5</sup>
  - SEPs dramatically reduce HIV infection in IDUs. Since the implementation of these programs in the late 1980s, new HIV infections among IDUs have declined overall by 80 percent.<sup>6</sup>

We cannot rely on further spending cuts in this budget. Dollars cut already outnumber revenues raised 3:1. Because of the national recession, people's needs are going up dramatically as the state's resources to meet those needs are falling. And spending cuts result in job losses.

Please fight for the **lives that can be saved by SEP and other prevention programs**. Thank you very much.

Martha Dale  
Executive Director  
Leeway, Inc.  
mdale@leeway.net  
40 Albert St.  
New Haven, CT 06511  
203-865-0068

Hope  
happens

1. Centers for Disease Control and Prevention. *Cases of HIV Infection and AIDS in the United States and Dependent Areas, 2007*; February 2009.
2. Marx MA, Crape B, Brookmeyer RS, Junge B, Latkin C, Vlahov D, Strathdee SA. Trends in Crime and the Introduction of a Needle Exchange Program. *American Journal of Public Health*. 2000;90(12):1933-6.
3. Harm Reduction Coalition. *Syringe Exchange Programs: Reducing the Risks of Needlestick Injuries*. New York: Harm Reduction Coalition; 2006.
4. Doherty MC, Junge B, Rathouz P, Garfein RS, Riley E, Vlahov D. 2000. The effect of a needle exchange program on numbers of discarded needles: A 2-year follow-up. *American Journal of Public Health*. 90(6):936-939.
5. Oliver KJ, Friedman SR, Maynard H, Magnuson L, Des Jarlais DC. Impact of a needle exchange program on potentially infectious syringes in public places. *Journal of Acquired Immune Deficiency Syndromes*. 1992; 5:534-535.
6. Centers for Disease Control and Prevention. *Estimates of New HIV infections in the United States*. Washington, D.C.: CDC; August 2008.
7. amfAR, The Foundation for AIDS Research. *The Effectiveness of Harm Reduction in Preventing the Transmission of HIV/AIDS*. New York: amfAR; November 2007.
8. amfAR, The Foundation for AIDS Research, North American Syringe Exchange. Network (NASEN), and Beth Israel Medical Center. *Areas with Syringe Exchange Programs - United States*, July 2009.

